

DO/EO BIBLIOGRAPHIC DATA ENTRY

SERIAL NUMBER:	09 / 254101	RECEIPT DATE:	03 / 01 / 99
IA NUMBER:	PCT/ DE97 / 01730	IA FILING DATE:	08 / 13 / 97
FAMILY NAME:	KNITL	DELAY WAIVED (Y/N):	Y
GIVEN NAME:	REINHARD	DEMAND RECEIVED (Y/N):	Y
PRIORITY CLAIMED (Y/N):	Y	PRIORITY DATE:	08 / 30 / 96
NO BASIC FEE (Y/N):	N	US DESIGNATED ONLY (Y/N):	N
ATTORNEY DOCKET NUMBER:	P98,3211	COUNTRY:	DEX
CORRESPONDENCE NAME/ADDRESS:	CUSTOMER NUMBER:	TELEPHONE	
		FAX	

NAME: HILL & SIMPSON

STREET: 85TH FLOOR SEARS TOWER

CITY: CHICAGO

STATE/COUNTRY: IL ZIP: 60606

EMAIL:

APPLICATION TITLES:

METHOD FOR INCORPORATING FUNCTIONS OF AN AUTOMATIC CALL DISTRIBUTION
SYSTEM INTO AN INTERACTIVE VOICE ANSWERING SYSTEM

TAB TO LAST POSITION,PUSH SEND

SERIAL NUMBER 09/254,101	FILING DATE 03/01/99	CLASS 379	GROUP ART UNIT 3742 2645	ATTORNEY DOCKET NO. P98.3211
-----------------------------	-------------------------	--------------	---	---------------------------------

APPLICANT
REINHARD KNITL, MUNCHEN, FED REP GERMANY; ALOIS RANZINGER, MUNCHEN,
FED REP GERMANY; ALEXANDER SCHLIWA, UNTERSCHLEISSHEIM, FED REP GERMANY.

CONTINUING DOMESTIC DATA***
VERIFIED

None AM

371 (NAT'L STAGE) DATA***
VERIFIED

THIS APPLN IS A 371 OF PCT/DE97/01730 08/13/97

Yes AM

FOREIGN APPLICATIONS***

VERIFIED FED REP GERMANY 19635329.7 08/30/96

Yes AM

IF REQUIRED, FOREIGN FILING LICENSE GRANTED 11/18/99

30 - Priority claimed SC 119 (a-d) conditions met	<input checked="" type="checkbox"/> yes <input type="checkbox"/> no <input checked="" type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance	STATE OR COUNTRY DEX	SHEETS DRAWING 2	TOTAL CLAIMS 17	INDEPENDENT CLAIMS 3
Verified and Acknowledged Examiner's Initials <u>AM</u> Initials _____					

HILL STEADMAN & SIMPSON
85TH FLOOR SEARS TOWER
CHICAGO IL 60606

TITLE
PROCESS FOR INCLUDING FUNCTIONS OF AN AUTOMATIC CALL DISTRIBUTOR
SYSTEM IN AN INTERACTIVE VOICE RESPONSE SYSTEM

FILING FEE
RECEIVED

\$840

FEES: Authority has been given in Paper
No. _____ to charge/credit DEPOSIT ACCOUNT
NO. _____ for the following:

- ☐ All Fees
- ☐ 1.16 Fees (Filing)
- ☐ 1.17 Fees (Processing Ext. of tim.
- ☐ 1.18 Fees (Issue)
- ☐ Other _____
- ☐ Credit

BEST AVAILABLE COPY